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CONFIRMATION NO. 8672

<b>SERIAL NUMBER</b> 10/517,004	<b>FILING OR 371(c) DATE</b> 06/06/2005 <b>RULE</b>	<b>CLASS</b> 606	<b>GROUP ART UNIT</b> 3773	<b>ATTORNEY DOCKET NO.</b> 16497.124
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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/IE03/00088 06/04/2003

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

IRELAND S020451 06/04/2002

Foreign Priority claimed <input type="checkbox"/> yes <input type="checkbox"/> no	<b>STATE OR COUNTRY</b> IRELAND	<b>SHEETS DRAWING</b> 5	<b>TOTAL CLAIMS</b> 13	<b>INDEPENDENT CLAIMS</b> 2
35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance				
Verified and Acknowledged	Examiner's Signature _____ Initials _____			

## ADDRESS

57360

## TITLE

BLOOD VESSEL CLOSURE CLIP AND DELIVERY DEVICE

<b>FILING FEE RECEIVED</b> 840	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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